



**TOWN OF WESTFORD
BOARD OF HEALTH
TOWN HALL
55 MAIN STREET
WESTFORD, MASSACHUSETTS 01886**

Beaver Complaint Data Sheet

Reorder_____

(W)_____

Date Received / /

Phone (H)_____

Complainant Address_____Map/Parcel_____

Complaint Location_____Map/Parcel_____Waters_____

Town_____County_____Zone_____

Is site located within estimated or priority habitat as indicated in recent NHESP natural heritage atlas? Yes_____No_____

Type of Complaint:

Circle all appropriate #'s

- | | | |
|-------------------------|------------------|-----------------|
| 1. Property Flooding | 2. Road Flooding | 3. Pond Raising |
| 4. Water Quality | 5. Tree Cutting | 6. Crop Damage |
| 7. Other (Specify)_____ | | |

For Board of Health use only, do not write below this line.

Disposition:

Circle all appropriate #'s

- | | | |
|---------------------------------------|--------------------------|-----------------------------|
| 1. Technical Advice | 2. Destroy Permit Issued | 3. Break Permit Issued |
| 4. Referred to Trapper | 5. Site Visit | 6. Pipe Installed: (#)_____ |
| 7. Contacted NHESP (Priority Habitat) | | |
| 8. Other (Specify)_____ | | |